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The nun apothecaries of Renaissance Florence: marketing medicines in the convent

SHARON T. STROCCHIA

Among the many 'agents of health' active in Renaissance Italy were religious women skilled in making medicines.[1] Heirs to a long tradition in herbal medicine, nuns prepared drugs and administered remedies to members of their religious communities throughout the Middle Ages. In the fourteenth century, Italian nuns put their herbal knowledge to non-curative uses in the remarkable dissections that helped establish the sanctity of their sisters in religion.[2] What was new about this therapeutic tradition in Renaissance Italy was its commercialization after 1500. In the sixteenth century, nuns capitalized on the burgeoning interest in medicinals to develop new revenue sources and enlarge their charitable scope. By producing and marketing drugs to the public, Renaissance religious women both augmented the medical resources available in Italian urban society and acquired roles of public significance beyond the spiritual realm. After 1600, convent pharmacies across the Italian peninsula grew in both number and reputation.[3] Gianna Pomata has shown that nuns in seventeenth-century Bologna were renowned for producing both standard remedies and medicinal 'secrets,' despite being pushed to the fringes of official medical culture by increasing professionalization.[4] Even though scholars have begun to recognize the significance of Italian convent pharmacies, there is still much to be learned about them and their role in the broader culture of their day.

I wish to thank Emory University and the Renaissance Society of America for sponsoring archival research on which this project is based, and the two anonymous journal reviewers for their constructive criticisms.

[1] Monica Green coined this term to refer to practitioners lacking formal titles who nevertheless played significant roles in healthcare and healing; 'Bodies, Gender, Health, Disease: Recent Work on Medieval Women's Medicine', *Studies in Medieval and Renaissance History*, ser. 3, 5 (2005), 1–46.

[2] Katherine Park, *Secrets of Women: Gender, Generation, and the Origins of Human Dissection* (New York: Zone, 2006), 39–76.

[3] The explosive growth of female monasticism across the peninsula between 1550 and 1650 concurrently multiplied the number of convent pharmacies, since each community was urged to maintain its own *spetieria*; see Jutta Sperling, *Convents and the Body Politic in Late Renaissance Venice* (Chicago: University of Chicago Press, 1999), 18.

[4] Gianna Pomata, 'Medicina delle monache. Pratiche terapeutiche nei monasteri femminili di Bologna in età moderna', in Gianna Pomata and Gabriella Zarri (eds.), *I monasteri femminili come centri di cultura fra Rinascimento e Barocco* (Rome: Edizioni di storia e letteratura, 2005), 331–63; *idem*, 'Practicing between Heaven and Earth: Women Healers in Seventeenth-Century Bologna', *Dynamis*, 19 (1999), 119–43.

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Drawing on unpublished archival sources, this essay analyses the development of convent pharmacies in Renaissance Florence and situates them in a changing medical and political landscape. These female-run apothecary shops shed light on several important issues for historians of Renaissance medicine and society: the nature and extent of women's medical agency; the acquisition and transmission of specialized knowledge outside a university or guild setting; the regulation of unofficial practitioners by guild and state authorities. The first part of the essay examines the origins of convent pharmacies along with their products, clientele and business practices. Part two inquires into the identity and training of nun apothecaries, focusing on the interplay between experiential knowledge and everyday practice. The final section asks how convent pharmacies were regulated and why they were protected by early Medici dukes. I argue that Florentine convent pharmacies remained vigorous entities throughout the sixteenth century despite tighter enclosure provisions and the professionalizing aspirations of guildsmen, partly because contestations over their status enabled Cosimo I de' Medici (r. 1537–74) and his immediate successors to advance their personal authority within a centralizing state.

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Why did Florentine religious women start marketing medicines around 1500? Part of the answer lies in a convergence of market forces with broad shifts in piety that increasingly emphasized social welfare over older forms of penitence. Lacking sufficient income from their endowments, most Renaissance nuns performed market work in order to survive. The surging interest in medicinals fuelled by printed health manuals and vernacular recipe books, the influx of drugs from the New World, and the advent of new diseases such as syphilis opened up new economic opportunities for religious women, whose resources were continually stretched thin by the rapid expansion of female monasticism throughout the Cinquecento.[5] Pushing local demand for pharmaceuticals still higher was the vibrant religious movement associated with the Dominican preacher Girolamo Savonarola (d. 1498), who emphasized charitable assistance to the poor and infirm as a spiritual duty. After Savonarola's death, his Florentine followers helped realize his vision of social welfare by establishing new charitable institutions like the local Incurabili hospital for syphilitics (founded 1521).[6] In addition, the many calamities besetting early sixteenth-century Florence – warfare, famine, repeated epi-

[5] Sharon Strocchia, *Nuns and Nunneries in Renaissance Florence* (Baltimore: Johns Hopkins University Press, 2009), 28–38, 111–51; William Eamon, 'Pharmaceutical Self-Fashioning, or How to Get Rich and Famous in the Renaissance Medical Marketplace', *Pharmacy in History*, 45 (2003), 123–9.

[6] Lorenzo Polizzotto, *The Elect Nation: The Savonarolan Movement in Florence* (Oxford: Clarendon Press, 1994), 397, 409.

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demics, gruelling siege – only heightened opportunities for unlicensed practitioners to enter the medical marketplace.

There certainly was room for new pharmaceutical initiatives in early Cinquecento Florence, since a relatively small number of apothecaries served an urban population of about seventy thousand. A 1558 guild census registered 'forty-six or more' apothecaries in the city, or roughly one pharmacist per 1,500 inhabitants.[7] This figure represents one-third the ratio of apothecaries found in sixteenth-century Rome, whose unusually high density can be attributed to the steady influx of pilgrims and tourists needing medical assistance. Still, Florence claimed a higher percentage of apothecaries than Venice, famed for its pharmaceutical culture, at least until the boom years of the seventeenth century.[8] Supplementing guild resources in all three cities were monastic pharmacies, such as the ones run by the Dominican friars of S. Maria Novella in Florence, who began selling medicines as early as 1381, and their counterparts at S. Marco, active after 1450, whose special remedies included stomach tonics, herbal liqueurs, and the brilliant red elixir called alkermes reportedly prized by Lorenzo il Magnifico.[9] These monastic pharmacies made significant contributions to the city's medical resources, but their finances and clientele have not yet been studied, making it unfeasible at present to compare these businesses to other apothecary shops.

Commercial pharmacies run by Florentine religious women contributed an often-overlooked tier of high-quality products, services and expertise to local health care.[10] Distributed widely across the city, the six shops identified to date were launched by communities of fifty to two hundred women belonging to different religious orders: two Benedictine houses (Le Murate, S. Agata); two

[7] Archivio di Stato, Florence (henceforth ASF). Ospedale di S. Maria Nuova (hereafter OSMN). Vol. 192, fol. 173r, dated 28 February 1558. The number of Florentine apothecaries dropped from 113 heads of household in 1427 to sixty in 1480; Antonella Astorri, 'Appunti sull'esercizio dello speziale a Firenze nel Quattrocento', *Archivio storico italiano* 147 (1989): 31–62. That number declined further in the first half of the Cinquecento. A 1553 guild census put the number of apothecaries resident in the Medici dominion at 200, with forty-eight living in the city (OSMN. Vol. 192, fol. 439r), whereas a ducal tax survey taken in the 1530s reported sixty-eight Florentine apothecaries, although it is unclear if all practiced their trade; Esther Diana, 'Medici, speziali e barbieri nella Firenze della prima metà del 500', *Rivista di Storia della Medicina*, n.s. 4, (1994), 13–27. Florentines began a new year on March 25; all dates here have been modernized.

[8] A 1526 Roman census listed ninety apothecary shops serving a population of 53,000, or one shop per 589 residents; Leonardo Colapinto, 'L'arte degli speziali a Roma nel Rinascimento', *Atti e memorie dell'Accademia italiana di storia della farmacia* (hereafter *AMAISF*), 12 (1995), 59–63. By contrast, in 1565 Venice had seventy-one pharmacies serving a population of roughly 172,000, or one shop per 2,422 inhabitants. By 1617, the number of Venetian pharmacies had risen to over a hundred, while the population fell to about 142,000, giving a ratio of one shop per 1,420 residents; Richard Palmer, 'Pharmacy in the Republic of Venice in the Sixteenth Century', in Andrew Wear, Roger French, and I. M. Lonie (eds.), *The Medical Renaissance of the Sixteenth Century* (Cambridge: Cambridge University Press, 1985), 100–17. Filippo de Vivo, 'Pharmacies as Centres of Communication in Early Modern Venice', *Renaissance Studies*, 21 (2007), 505–21, at 505, mistakes the ratio of Venetian pharmacists to the populace.

[9] The friars of S. Maria Novella opened a new dispensary in 1542, but it only became a recognized business in 1612; *Farmacie storiche in Toscana* (Florence: Polistampa, 1998), 19, 32.

[10] In 1563, there were forty-seven convents in Florence housing 3,823 nuns, who represented 5.5 to 6.5% of the urban population; Strocchia, *Nuns and Nunneries*, 200n.

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Franciscan affiliates (S. Orsola, S. Francesco); and two groups of Dominican tertiaries (S. Caterina da Siena, S. Vincenzo, called the Annalena). In addition, several convents outside the city walls either sold medicines to the public or included their remedies in gift exchanges with laity. Other nunneries in the neighbouring towns of Pistoia and Prato, some of which enjoyed strong ties with Florentine convents, also operated commercial pharmacies well into the eighteenth century.[11] Disparities in available sources – convent account books, house chronicles and necrologies, guild petitions – make some of these shops far better documented than others. These cadres of nun apothecaries joined the ranks of Italian wives and widows who either managed their husbands' apothecary shops or worked as pharmacists themselves.[12]

The first Florentine nuns to venture into commercial pharmacy were the Dominican tertiaries of S. Caterina da Siena. Founded in 1496 at the height of the Savonarolan movement and officially chartered in 1509, this convent is best known for its thriving musical and artistic culture, especially as home to Sister Plautilla Nelli, the 'first woman painter' of Florence.[13] From its inception, S. Caterina was under the supervision of the Savonarolan friars of S. Marco, located just across the square bearing their name. The convent's Savonarolan networks and shared ideals of active charity proved decisive to the pharmacy's origins. One of the principal goals in setting up a shop at S. Caterina was to make medicines that could be distributed to the poor at little or no cost in a circular moral economy – a practice that both reduced pharmacy profits and created ongoing frictions with the apothecaries' guild over what was perceived as unfair pricing. Savonarolans framed this kind of poor relief, whose expenses would be continually underwritten by a spiritually engaged lay community, as essential to a righteous republic eager to care for its most vulnerable members. A related objective was to generate much-needed revenue for the new convent through 'honest' work, since the community initially owned little property. The S. Caterina pharmacy thus wove commercial and charitable impulses into a single, unified endeavour. Aided by their confessor Fra Mariano Ughi, the nuns invested roughly ninety florins in 1515 to buy necessary goods and equipment from Bernardo Mini, an ardent

[11] The Poor Clares of Monticelli and S. Matteo in Arcetri made remedies, but the extent of commercial production cannot be gauged from extant business ledgers. The Dominican nuns of S. Vincenzo in Prato, part of the Savonarolan religious network, established a commercial pharmacy in 1562; *Farmacie storiche*, 81–2. San Mercuriale in Pistoia maintained a strong pharmaceutical tradition from the early 1600s well into the eighteenth century, although its origins are unknown; Stefania Capecchi, 'Il ricettario della molto reverenda Madre Donna Maddalena Favilla, speziale nel monastero di San Mercuriale della città di Pistoia nell'anno 1750', *AMAISF*, 18 (2001), 55–60.

[12] Elizabeth Cohen notes that Roman apothecaries' wives were highly valued for their managerial and productive contributions; 'Miscarriages of Apothecary Justice: Un-separate Spaces of Work and Family in Early Modern Rome', *Renaissance Studies*, 21 (2007), 480–504. In Venice, five out of eight-five registered apothecaries in 1569 were women; De Vivo, 'Pharmacies', 516.

[13] See the essays in Jonathan Nelson (ed.), *Suor Plautilla Nelli (1523–1588): The First Woman Painter of Florence* (Florence: Cadmo, 2000); Patrick Macey, *Bonfire Songs: Savonarola's Musical Legacy* (Oxford: Clarendon Press, 1998).

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Savonarolan and noted apothecary hailing from a long line of medical practitioners.[14] Other committed Savonarolans backed the venture in its early years. Among the shop's suppliers in the 1510s was Battista Landucci, whose father Luca was a well-known pharmacist, chronicler and avid supporter of Savonarolan welfare projects.[15] Moreover, one of the first women to train as an apothecary at S. Caterina – a process that will be described later – was Sister Bartolomea Bettini, a young nun in her twenties whose father Piero was deeply involved in the cause; five of her brothers became friars at S. Marco.[16] These Savonarolan connections continued to shape the development of the pharmacy throughout the sixteenth century.

By 1517, two years after obtaining their initial inventory, the S. Caterina nuns had begun distilling herbs for sale. Within a decade they had added a full product line of such ready-made items as syrups, oils, electuaries, unguents, powders, pills, purgatives, and medicinal waters that traditionally stocked the shelves of Renaissance pharmacists.[17] The S. Caterina pharmacy produced and sold an assortment of pharmaceutical remedies and everyday goods that overlapped with wares marketed by lay apothecaries. Nuns' products ranged from compound medicines tailored for individual patients to various kinds of soap that figured prominently in the 'culture of cleanliness' evolving in Renaissance Italy.[18] All of their wares had to conform to the standards established by the famed Florentine *Ricettario* of 1499. In keeping with Renaissance commercial culture, convent pharmacies developed reputations over time for various specialties: by the late sixteenth century, S. Caterina became renowned for its syrups and distilled rose water, used as both a topical antiseptic and as an ingredient in other compounds, while the S. Orsola pharmacy enjoyed fame for its pills, taken by Cosimo I among others.[19]

Like remedies marketed by other druggists, nuns' medicines were used to treat many common ailments (burns, wounds, toothaches, fevers, coughs, digestive problems) or could be taken as part of a regular, preventive health regimen. Other notable convent products included fruit conserves and various sugar-based delicacies considered to have important health-giving properties in a Galenic medical framework. Importantly, the perceived efficacy of these remedies was based on naturalistic claims, not on religious healing authority. Whether or not the shop sold cosmetics remains an open question. Extant ledgers did not itemize cosmetic products, which were seen as being valuable for health but roundly condemned by Savonarola as

[14] ASF, Corporazioni Religiose Soppresse dal Governo Francese (hereafter CRSGF). 106. Vol. 30, fol. 49r.

[15] ASF, CRSGF. 106. Vol. 51, fol. 47v, and Vol. 52.

[16] ASF, CRSGF. 106. Vol. 13, fols. 51r, 81v; Vol. 30, fol. 95r. Bartolomea's brother Fra Luca composed a famous *lauda* in Savonarola's memory; Macey, *Bonfire Songs*, 124–9.

[17] David Gentilcore, ' "For the Protection of Those Who Have Both Shop and Home in this City": Relations between Italian Charlatans and Apothecaries', *Pharmacy in History*, 45 (2003), 108–21. ASF, CRSGF. 106. Vol. 13, fols. 51r, 81v.

[18] Douglas Biow, *The Culture of Cleanliness in Renaissance Italy* (Ithaca: Cornell University Press, 2006).

[19] Enrica Viviani della Robbia, *Nei monasteri fiorentini* (Florence: Sansoni, 1946), 21.

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'vanities'.[20] Convent records are also vague about whether their pharmacies retailed some of the sugar purchased through international brokers or simply consumed large quantities of it in the course of making remedies.[21] However, neither the S. Caterina shop nor other convent pharmacies marketed wax – a consistent money maker over which lay apothecaries enjoyed a guild monopoly – which probably helped soften guild opposition to convent initiatives.

Using earnings from more lucrative silk work to expand their business in the 1520s, the S. Caterina nuns quickly transformed the pharmacy into a profitable venture that helped support everyday living expenses, architectural expansion, and convent furnishings. By 1525, only a decade after its foundation, the pharmacy was already contributing six per cent of earned income to a mixed convent economy dominated at this early stage by silk work, which accounted for roughly half of earned income, and dowry payments, which comprised the bulk of convent revenues as the community recruited over a hundred new members by 1520.[22] Although spinning gold thread remained more profitable, it was saddled with moral objections, whereas making medicines fulfilled a core religious objective. The lack of civic tax reports or visitation records for the early Cinquecento makes it impossible to gauge the full economic contribution of pharmacy production. Regardless, even modest income from this newly commercialized activity helped S. Caterina cover cash shortfalls, buy property, and diversify its economic portfolio.

By the later Cinquecento, the shop had grown in economic significance and expanded its scale of operation, judging by the impressive capital investment made in 1570. That year, the nuns bought a large house on Via Larga (now Via Cavour) contiguous with their complex for 1,150 florins – the equivalent of twelve to fifteen monastic dowries – to serve as the pharmacy's new premises; they then spent another 250 florins to remodel the property for commercial use. This location ensured that pharmacy customers enjoyed easy access to the shop from a major civic artery.[23] Besides raising money, the pharmacy brought other rewards in the form of craft skills useful to the nuns' burgeoning artistic workshop. Not only did painting and pharmacy share many of the same materials and suppliers; apprenticing in the pharmacy also familiarized young nuns with grinding, boiling, and other skills that could be used in making altarpieces, refurbishing frames, and sculpting plaster and papier-mâché objects. This symbiotic relationship may help explain why both the pharmacy and craft workshops flourished simultaneously at S. Caterina throughout the sixteenth century.

[20] Sandra Cavallo, 'Health, Beauty, and Hygiene', in Marta Ajmar-Wollheim and Flora Dennis (eds.), *At Home in Renaissance Italy* (London: V&A Publications, 2006), 174–87.

[21] For instance, in 1556 the Annalena nuns bought a cask of sugar weighing 163 pounds from Lorenzo Nasi in Pisa, 'which we consigned to our *spetieria* here in the convent;' CRSGF. 105. Vol. 63, fol. 257r.

[22] ASF, CRSGF. 106. Vol. 30, fols. 90r, 95r; Strocchia, *Nuns and Nunneries*, 34.

[23] ASF, CRSGF. 106. Vol. 35, fol. 207v.

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Because commercial production required large volumes and a wide range of *materia medica*, the S. Caterina pharmacy relied heavily on outside suppliers for batches of manna, violets, cassia, and various herbs, as well as for huge casks of sugar and exotic plants that could not be grown locally. The nuns obtained some of these commodities through their physicians, for whom they compounded individual prescriptions; they also regularly bought raw materials in bulk from at least four lay apothecary firms. The shop's chief supplier, however, was S. Marco, which used its own pharmacy as a trade conduit.[24] The S. Marco friars also monopolized the performance of liturgical services at S. Caterina and other convents under their tutelage, which enabled them to derive 'prestige, influence, and a great deal of money' from their female affiliates. To compensate the friars for both masses and medicinal supplies, the S. Caterina nuns sometimes rendered the equivalent value in pharmaceutical items they had manufactured in-house. Some of these items were used by the friars themselves; other wares such as soaps and syrups were subsequently retailed through the vaunted S. Marco pharmacy. Thus the friars acted concurrently as suppliers, consumers and vendors of nuns' merchandise.[25] These interlocking economic and supervisory roles solidified S. Marco's control over S. Caterina's productive activities and made the nuns' pharmacy vulnerable to local political struggles, first as the Savonarolan movement itself fractured, and later as the friars locked horns with Duke Cosimo. This arrangement was unique among Florentine convent pharmacies; shops affiliated with other orders or congregations were not supplied or supervised in comparable ways. Moreover, older, propertied convents not associated with S. Marco supplemented outside purchases of medicinals with home-grown plants to a greater extent. The Annalena nuns, for instance, cultivated simples in their extensive gardens and harvested saffron on their farm-holdings, while the nuns of Le Murate, whose apothecary shop was in high gear by the mid-sixteenth century, relied on their celebrated gardens and internal orchards for both fruits and medicinal herbs.[26]

As S. Caterina was developing its business, another convent pharmacy was springing up across the river. Following the punishing siege of 1529–30 that had brought the city to its knees, the Annalena nuns set up an apothecary shop selling a full line of products comparable to those marketed by S. Caterina. In the face of a growing subsistence crisis, the Annalena nuns – prompted by two enterprising members, Daniella di Battista and Maria Salome de' Lioni – seized the opportunity to simultaneously rebuild their treasury and extend poor relief efforts. These nuns also capitalized on the dearth of pharmacies in the quarter of S. Spirito, which claimed only three apothecary shops in the 1480s, despite being the second most populous urban

[24] ASF, CRSGF. 106. Vol. 33, fols. 6r, 19r, 47v, 50r, 83r, 84r.

[25] ASF, CRSGF. 106. Vol. 35, fols. 69v, 101v, 130v–132r; quote from Polizzotto, *Elect Nation*, 190.

[26] ASF, CRSGF. 105. Vol. 68, fol. 194r; K. J. P. Lowe, *Nuns' Chronicles and Convent Culture in Renaissance and Counter-Reformation Italy* (Cambridge: Cambridge University Press, 2003), 140.

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quarter; the situation probably had not changed significantly fifty years later.[27] Using stock purchased from Andrea del Garbo, member of the famed dynasty of physician-pharmacists, the Annalena pharmacy opened its doors in 1535.[28] Deteriorating economic conditions throughout the 1530s and 40s provided plenty of demand for affordable wares. According to the eighteenth-century antiquarian Giuseppe Richa, the Annalena nuns soon were trading 'in every sort of medicament needed for any kind of illness' and were diligently compounding 'every sort of medicine' in their workroom.[29] The business quickly became integral to convent finance, consistently generating five to ten per cent of convent earnings over the second half of the Cinquecento. Only textile production and boarding fees netted more earned income.[30] Although pharmacy revenues remained modest, they could tip the balance between solvency and debt because convents as institutions operated on such small margins. For instance, in 1562 the Annalena pharmacist 'loaned' the abbess thirty-five ducats to cover a general shortfall; that sum represented 2.5% of annual convent expenses. The pharmacy made a similar series of loans in the 1590s, ranging from fifteen to fifty-five ducats each.[31] By the late sixteenth century, the pharmacy at S. Agata had become equally active, although we know little about its development; in 1574, the nuns reported that their apothecary shop accounted for almost ten per cent of earned income. Likewise, the nuns of S. Orsola claimed in 1561 that their pharmacy provided 'their sustenance' and that they had 'no enterprise more lively' than the shop, but neither this petition nor their account books offer additional information.[32]

The financial success of convent pharmacies raises important questions about the customers who bought their wares. Monica Green has argued that women's medicine in medieval Europe was not strictly women's business: that is, women utilized a wide range of medical practitioners rather than relying solely on other women for healthcare services.[33] That observation holds equally true for Renaissance Florence. Unfortunately, the loss of secondary shop ledgers means that pharmacy clients must be reconstructed from general convent account books, which do not always individuate paying customers. Nonetheless, it appears that nuns built an extensive clientele for assorted goods and services via their female networks – relatives, friends, boarders,

[27] Astorri, 'Appunti', 54–5.

[28] ASF, CRSGF. 105. Vol. 27, fol. 30v; Vol. 61, fols. 128v–129r, 149v–150r. Andrea del Garbo also purveyed medicinals to the convent pharmacy at S. Francesco. Another supplier at the Annalena was Bernarbo Bicci, descendant of the painters Bicci di Lorenzo and Lorenzo di Bicci.

[29] Giuseppe Richa, *Notizie istoriche delle chiese fiorentine* (Florence: P.G. Viviani, 1754–62), 10: 157.

[30] ASF, CRSGF. 105. Vols. 29 and 30. In the second half of the century, textile work accounted for roughly 35% of earned income, boarding fees for 50–55%.

[31] ASF, CRSGF. 105. Vol. 29, fol. 46r; Vol. 35, fols. 10r, 15v, 25r, 55v. The ducat was roughly equivalent to the florin after 1530.

[32] ASF, Manoscritti. Vol. 176, insert 1; ASF, Auditore dei Benefici Ecclesiastici poi Segreteria del Regio Diritto (hereafter Auditore). Vol. 4894, fol. 68r–v.

[33] Green, 'Bodies, Gender, Health, Disease'.

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neighbours, tenants, spiritual allies – with whom they often enjoyed multiple associations. Customers buying 'medicines, syrups and other remedies' from the Annalena pharmacy, for instance, included a number of patrician women who also commissioned embroidery and sewing projects from the nuns.[34] Their patronage both supported the convent financially and underwrote the distribution of medicines to the nameless poor. Other steady customers included young pupils and boarders, as well as elderly widows who stipulated in their residential contracts that medicines be provided during their stay. In 1557, the Annalena nuns administered health-sustaining purgatives made in-house to their adolescent boarders Caterina and Maddalena Ridolfi, after first obtaining permission from their father. Similarly, the nuns kept a running tab for their teenaged boarder Margherita Bonini for the 'medicines, syrups, and other medicaments she had from our pharmacy when she was ill' in 1587. This account went unpaid when Margherita left the convent soon afterward to marry, forcing the nuns to sue for compensation.[35] Conversely, pharmacy business might stimulate other kinds of economic relationships. Among the early patrons of S. Orsola's pharmacy was Duke Cosimo's ailing mother, Maria Salviati Medici, for whom the nuns concocted special tonics in the 1540s (not always to her satisfaction).[36] This connection soon blossomed into doing specialized textile work for the Medici court as well as provisioning special medicines to the dukes.

Nuns' relatives and longtime patrons also purchased their medicaments. In 1607 the Florentine patrician Bernardo Gondi, whose associations with S. Caterina stretched back almost a century, bought 'several medicines' worth ten florins for his sick mother; a few years later, he perpetuated these institutional links by placing two of his daughters in the convent as nuns.[37] Other grateful patrons occasionally earmarked pious bequests for use by convent pharmacies, which both strengthened their financial health and augmented charity to the poor. The S. Caterina pharmacy also numbered several religious institutions among its clientele; the convents of S. Lucia and S. Luca situated on nearby Via S. Gallo regularly purchased remedies from their neighbour, although these transactions formed only a fraction of its business.[38]

The striking number of women among pharmacy clients – some of whom came into the shop themselves, according to convent accounts – points to an important difference between convent pharmacies and lay apothecary shops. Most customers patronizing the Speziale al Giglio in late fifteenth-century Florence were men, although a small number of women (mainly widows) shopped there in person. Apothecary clients in fourteenth-century Prato

[34] ASF, CRSGF. 105. Vol. 67, fol. 202r; Strocchia, *Nuns and Nunneries*, 142–3.

[35] ASF, CRSGF. 105. Vol. 29, fol. 82v; Vol. 64, 54v–55r; Vol. 67, fols. 201v–202r. It is unclear if these remedies were geared specifically to the medical needs of young girls.

[36] ASF, Mediceo del Principato. Vol. 1170, insert 7, fol. 392.

[37] ASF, CRSGF. 106. Vol. 36, fols. 106v, 168v.

[38] ASF, CRSGF. 111. Vol. 67, unfoliated; ASF, Monastero di S. Luca. Vol. 89, fols. 149v, 160r.

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included women as well as men, yet it is not clear if they actually came into the shop or sent servants.[39] Commercial transactions never followed a simple gendered division but were conditioned by class, value of the purchase, and other circumstances. Yet the active patronage of women clients – however imprecise numerically – suggests that convent pharmacies functioned as sites of female sociability, much like convents themselves. Respectable women could shop at convent pharmacies to purchase remedies for their household or confer with nun apothecaries without jeopardizing their reputation, since pharmacy visits could be easily integrated into routine social exchanges with nuns or attending mass at convent churches. In this respect, convent pharmacies enjoyed a competitive advantage over secular shops. At S. Caterina, for instance, where open reclusion was the norm until 1575, pious laywomen visited the nuns frequently, sometimes staying overnight in the house to pray and sing hymns. The Savonarolan activist Lorenza Ginori Rucellai, who was a close friend and confidant of the convent's head pharmacist, Giovanna Ginori, and her sister Maddalena, reportedly was 'always living, associating, and discussing confidential matters with them'.[40] It is not difficult to imagine that Lorenza and other women like her exchanged illness stories, therapeutic advice, news and information in convent dispensaries as well as in convent parlours, which buzzed with friends, neighbours, relatives and servants who came to visit each other as well as the nuns. This topic merits further research, but one thing is clear: both the dispensary and the parlour were important zones of accommodation between nuns and laity that elicited oversight by state and ecclesiastical authorities.

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David Gentilcore has remarked that we know more about Renaissance pharmacy than pharmacists.[41] While there is still much to learn about nun apothecaries, institutional sources permit some basic observations about their identities and how they acquired and transmitted their skills. In embarking on commercial pharmacy, religious women built on the accumulated knowledge and traditions of what has been called 'domestic' medicine: that is, treatments administered in the home by patients themselves, their relatives, friends, and neighbours. There were considerable overlaps between household medicine and commercial remedies made by apothecaries. Both used similar ingredients and manufacturing techniques, such as pounding, grinding, and distillation; both relied on basic botanical knowledge, such as optimal times for

[39] Evelyn Welch, *Shopping in the Renaissance: Consumer Cultures in Italy, 1400–1600* (New Haven: Yale University Press, 2005), 219.

[40] Biblioteca Nazionale Centrale, Florence (henceforth BNCF). Ms. Landau Finlay. 72, fol. 55v.

[41] David Gentilcore, 'Apothecaries, "Charlatans", and the Medical Marketplace in Italy, 1400–1750', *Pharmacy in History*, 45 (2003), 91–4.

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harvesting simples, that was widely diffused in oral tradition and manuscripts like the *Tacuinum sanitatis*.[42]

Yet there were important differences between household medicine and commercial pharmacy, whose greater scope and scale required specialized equipment, dedicated space, broader technical expertise and public reputation. Renaissance pharmacies typically featured two or three separate rooms: the dispensary for displaying and selling products; the actual production site or 'kitchen' where herbs were distilled and medicines compounded; and sometimes an adjacent storage area for medicinals. At Le Murate, the ground-floor location of these spaces allowed customers easy access from the street, but also made the rooms vulnerable to flooding in this low-lying district. After the shop suffered severe damage in the 1557 flood, the nuns built a new storage room on an upper floor at considerable expense 'to keep the medicinal items safe'. They also invested heavily in special equipment to meet commercial demand. By 1580, the pharmacy 'kitchen' featured a large brick apparatus called a 'pyramid', similar to the device shown in Fig. 1, on which dozens of alembics could be placed over a single fire, thereby increasing the volume obtained from a single distillation.[43]

Other business requirements distinguished convent pharmacies from household production. Evelyn Welch has noted that Renaissance dispensaries needed a strong visual element such as clearly marked storage jars to inspire consumer confidence in the wares.[44] Some Italian convents commissioned the beautiful maiolica containers for which Renaissance pharmacies are renowned, but other furnishings may have served a similar purpose of building trust.[45] Before the 1557 flood, the dispensary at Le Murate displayed a marble image of the Madonna sculpted by Donatello (or his workshop) on a counter opposite the door 'where the preparations and medicines were ordered'; this image had helped achieve a miraculous cure many years earlier.[46]

To move beyond the basics of domestic medicine, nuns apprenticed with a more skilled practitioner. This arrangement paralleled the transmission of other craft skills in the convent as well as the traditional mode of apothecary training. Convent pharmacies divided duties between a knowledgeable head

[42] This subject warrants greater consideration than can be offered here. For now, see Cavallo, 'Health, Hygiene, Beauty', and the illuminating essays in Jean Givens, Karen Reeds, Alain Touwaide (eds.), *Visualizing Medieval Medicine and Natural History, 1200–1550* (Aldershot: Ashgate, 2006).

[43] BNCF. II. II. 509. fols. 139v, 141r–v.

[44] Welch, *Shopping in the Renaissance*, 151–8.

[45] In the seventeenth century, the Roman nuns of S. Cecilia outfitted their commercial pharmacy with high-quality cabinets and some 200 maiolica vases, as well as scales, mortars, and medicaments; Leonardo Colapinto, 'Monachesimo e spezierie conventuale in Italia tra XII al XVII secolo', *AMAISF*, 12 (1995), 107–13. For the maiolica collection commissioned by Benedictine nuns near Viterbo for their pharmacy in 1652, see Maria Selene Sconci and Romualdo Luzi, *La spezieria di San Benedetto a Montefiascone. Dalle collezioni di Palazzo Venezia in Roma* (Ferrara: Belriguardo, 1994).

[46] Lowe, *Nuns' Chronicles*, 337–8; BNCF. II. II. 509, fol. 121v.

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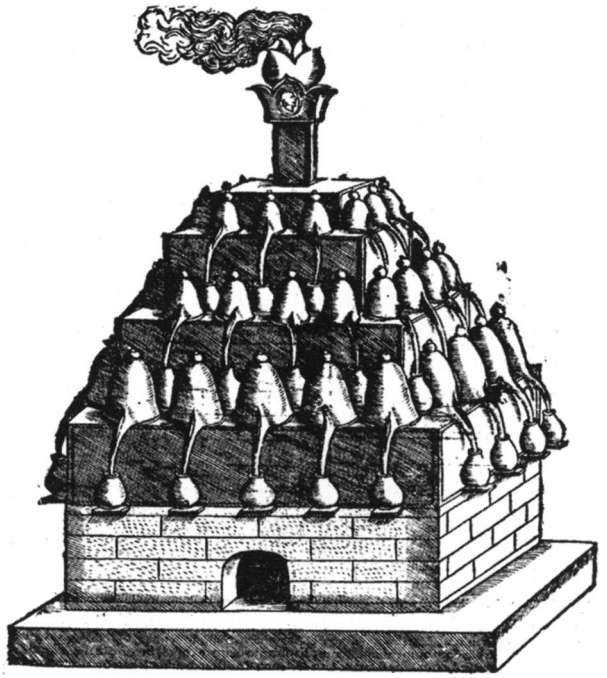

Fig. 1 Pyramid furnace for distillations. Pietro Andrea Mattioli, *Del modo di distillare le acque da tutte le piante*, Venice, 1604 (courtesy of Special Collections, University of Wisconsin-Madison Library)

pharmacist (*spetiala maggiore)* and one or more apprentices.[47] The head pharmacist was responsible for compounding complex preparations, supervising production, maintaining accounts, taking inventory, training new assistants, and coordinating efforts with the abbess and convent nurse. Tasks assigned to her apprentice or assistant (*spetiala minore)* included such basic procedures as pounding herbs or preparing binding materials for pills and ointments, which prepared her for more advanced work. It took time to master this healing art. Consequently, most head pharmacists remained in office for longer periods than other convent officers, who normally rotated positions every one or two years. At Le Murate, Sister Agostina Rinuccini ran the pharmacy for fifteen years before being elected abbess in 1572; her counterpart at S. Caterina, Sister Giovanna Ginori, served as head pharmacist for almost four decades until her death circa 1579.[48] The Annalena nuns took a slightly different tack; they tried to strike a balance between depth of experience and diffusing medical knowledge more broadly throughout their community. The head apothecary there normally served for three to five years before rotating out of

[47] The following discussion is culled from CRSGF. 105. Vols. 33, 105.
[48] BNCF. II. II. 509, fol. 121v; BNCF. Ms. Landau Finlay. 72, fol. 91r.

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office, often becoming the next head nurse, where she used her expertise to nurse the sick. Nuns who displayed special aptitude for one or both positions rotated back in for additional terms.[49] Years after leaving office, skilled practitioners might still be tapped for practical advice. The Dominican serving nun Andrea (d. 1613) so distinguished herself as a pharmacist at S. Jacopo that 'even though she didn't know how to read, she knew and understood everything about that office so well that after she finished her turn, all of the other nun-apothecaries always consulted her and never made an electuary or other important preparation unless she was present.'[50] By drawing on the training and knowledge transmitted from one cohort of nuns to another, Florentine convents developed a self-sustaining cadre of medical personnel skilled in both pharmacy and nursing. They still hired other practitioners – barber-surgeons to pull aching teeth, physicians to treat assorted conditions – but these competencies meant that they could self-manage some of their health care.

To remain viable in a commercial market, however, nun pharmacists had to stay current with the latest ideas and production methods, despite the growing restrictions of *clausura*. While they clearly valued experiential wisdom, nuns also accessed new knowledge from printed pharmaceutical texts like Pietro Andrea Mattioli's highly influential *Discorsi* on Dioscorides (first Italian edition 1544) which contained an appendix on the art of distilling herbs (later published separately as *Del modo di distillare le acque da tutte le piante*). Word of mouth spread by convent physicians or suppliers also expanded nuns' expertise. In the 1580s, the long-time head pharmacist at Le Murate, Sister Umiliana Lenzi, kept abreast of new developments with the help of Stefano Rosselli, apothecary to Granduke Ferdinand I. Drawing on Mattioli's work, Rosselli advised her that 'herbs distilled in glass conferred greater benefit to the body than those distilled in lead,' thereby persuading her that it was worth investing a hundred ducats in new manufacturing equipment.[51] It may also be the case that nun apothecaries in different convents exchanged information with each other, using their kinswomen or others as intermediaries. At mid-century, there were a number of Bettini, Ginori, de' Lioni and del Riccio nuns – all active apothecaries – living at S. Caterina, S. Orsola, and the Annalena.[52]

Convent records afford a rare glimpse into the life and work of Sister Giovanna Ginori, a nun apothecary whose efforts were central to the development of the S. Caterina pharmacy.[53] Entering the community at age twelve, Giovanna (secular name Ginevra) took the veil in 1517 when she was sixteen

[49] For instance, Sister Orsola del Riccio served as head pharmacist from 1558–63, 1566–70, and had begun another term in 1579 when she died; similarly, Sister Lena da Catignano fulfilled this office in 1563–66, 1576–79, and 1585–87. ASF, CRSGF. 105. Vols. 64, 65, 66.

[50] ASF, San Jacopo. Vol. 23, fol. 150v.

[51] BNCF. II. II. 509, fol. 141r–v.

[52] ASF, Auditore. Vol. 4892, fols. 33r–v, 95r–96v, 141r.

[53] BNCF. Ms. Landau Finlay. 72, fols. 90v–92r; ASF, CRSGF. 106. Vol. 12, fol. 2r–v.

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years old. Her father Simone di Giuliano was a noted Savonarolan, as were many of her Ginori kinswomen known for their charitable work and devotional self-confidence. One of her relatives, Leonarda Barducci Ginori, founded a shelter for vulnerable girls in 1541 that bristled with Savonarolan associations.[54] This shared family interest in helping the helpless probably accounts for Sister Giovanna's placement in the pharmacy, where as a young nun in her twenties she apprenticed for six years – a term comparable to the three to eight years required of guild aspirants in Siena and Rome.[55]

During her apprenticeship, Ginori 'quickly became so expert at the job that the other nuns decided amongst themselves not to confer any other convent office upon her'. Consequently, Sister Giovanna ran the pharmacy for the next thirty-seven years, developing new products, expanding its client base, and building its reputation. As she matured in her profession, Ginori became 'extremely knowledgeable about medicinals and botanicals' not only by means of observation, experimentation, and regular hands-on practice, but also by studying printed scientific materials whose exact titles are unknown.[56] Other technical information probably filtered in via the S. Marco apothecary, various suppliers (the Mini and Pinadori apothecary firms), the convent physician Francesco Gamberelli (for whom Ginori compounded specific prescriptions), and lay supervisors, one of whom was the rising apothecary Stefano Rosselli. Most likely the convent's extensive female networks, especially those women engaged in welfare work themselves, conveyed their own experiential knowledge, requested specific products, or at least updated Ginori about market trends.

By mid-century, Sister Giovanna enjoyed an established reputation as a skilled practitioner. Learned Florentine physicians and other apothecaries reportedly recommended that 'anyone wishing to take advantage of good medicinal products and be provisioned with conserves, *giulebbe*, and other substances to purge and maintain good health' would do well to consult her.[57] Ginori devoted her life to healing within her own community as well, 'sometimes staying up eight nights in a row with little or no sleep' to tend sick nuns. To perpetuate this legacy, Sister Giovanna trained two 'excellent apprentices' from Savonarolan stock who had mastered 'her way of working with great understanding'. After Ginori's death circa 1579, one of them – fifty-year-old Raffaella Gondi, whose relative Marietta Gondi had helped found another

[54] Nicholas Terpstra, 'Mothers, Sisters, and Daughters: Girls and Conservatory Guardianship in Late Renaissance Florence', *Renaissance Studies*, 17 (2003), 201–29.

[55] A. Nannizzi, 'L'arte degli speziali in Siena', *Bullettino senese di storia patria* 46 (1939): 93–131, 214–60; Colapinto, 'Arte speziali a Roma', 62–3.

[56] Pharmaceutical manuals and medical texts found in seventeenth-century Italian convents are discussed by Pomata, 'Medicina delle monache', 333, and Danilo Zardin, 'Libri e biblioteche negli ambienti monastici dell'Italia del primo Seicento', in Pina Totaro (ed.), *Donne, filosofia e cultura nel Seicento* (Rome: Consiglio nazionale della ricerca, 1999), 347–83, at 376–7.

[57] BNCF. Ms. Landau Finlay. 72, fol. 91r–v.

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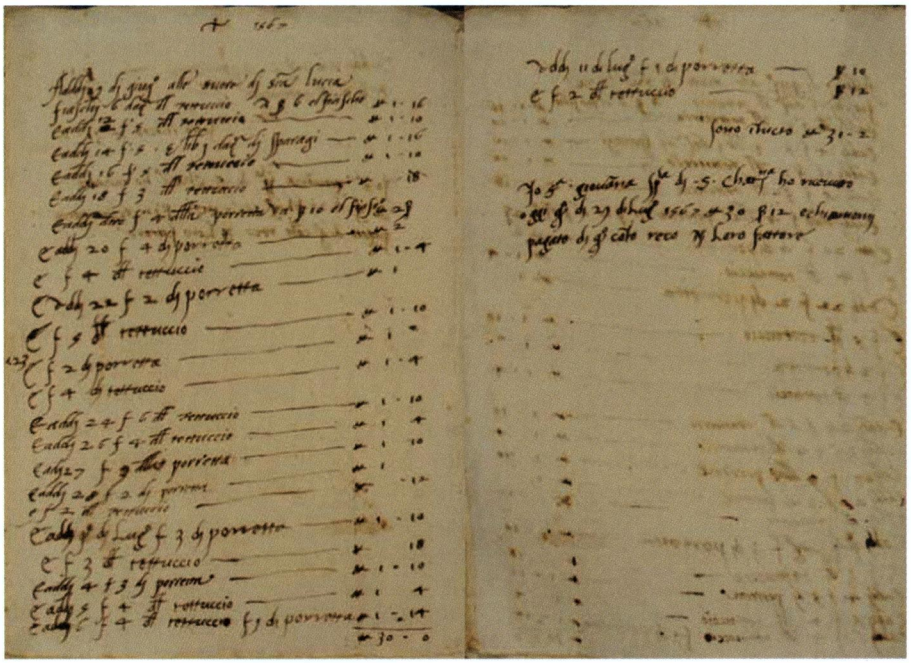

Fig. 2 Receipts in the hand of Sister Giovanna Ginori, 1567, ASF, CRSGF. 111. Vol. 67, unfoliated (by permission of the Ministero per i Beni e le Attività Culturali)

girls' conservatory in 1554 – took over the pharmacy.[58] The other apprentice, Raffaella's older sister Gostanza, became the convent nurse.

No letters or recipe books penned by Sister Giovanna have surfaced to date, but we do have two itemized bills of sale written in her own hand. Both are lists of medicinal waters she sold to the Dominican nuns of S. Lucia, who tucked these receipts among their own papers. The first, acknowledging payment on 29 July 1567, is signed 'I, Sister Giovanna, *spetiala* of S. Caterina' (Fig. 2).[59] It is tempting to read a sense of occupational identity into this simple statement, which may be justified given Ginori's long service and esteemed reputation. The list records the large volume of two popular medicinal waters S. Caterina provisioned to its neighbours every couple of days between 9 June and 11 July 1567: sixty-two flasks of *acqua del tettuccio*, a local spring water with purgative properties; and twenty-five flasks of *acqua della porretta*, a common restorative tonic. Other convent ledgers show that these items were often purchased together, suggesting that they were used in tandem as part of a regular health regimen. It is also worth noting the price tag of 4 $^{1}/_{2}$ florins, which was

[58] Terpstra, 'Mothers', 209.

[59] ASF, CRSGF. 111. Vol. 67, unfoliated; second receipt dated 1571.

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consonant with current market prices; S. Caterina made little profit on the transaction. From a consumer standpoint, however, paying this amount for a month's worth of medicinal waters alone, even for 130 residents, shows how costly even preventative care could be.[60]

One striking feature of the biographies of nun apothecaries is the frequency with which they rose to the position of prioress or abbess. This pattern was not seen among other monastic officeholders like sacristan or novice mistress. Sister Giovanna Ginori was unusual in this regard; given her exceptional skill as a pharmacist, she served her community best in that role. At other religious houses, however, the pharmacy was an important proving ground for top convent officers because it blended specialized knowledge, practical skills and sound judgment with compassion and attentiveness to both finance and public relations. At S. Orsola, Sister Benedetta Bettini – famed for the pills and other 'important medicines' she compounded for Duke Cosimo and his successors – served three terms as prioress between 1563 and 1576. During these periods, she must have relied heavily on her assistants to keep the pharmacy running at peak production.[61] Two of the earliest known nun pharmacists, Cecilia Michelozzi at S. Caterina and Maria Salome de' Lioni at the Annalena, also were selected by their peers for the top governance position. And when Le Murate transferred five of its members to populate the new convent of SS. Concezione circa 1590, the nuns elected sixty-year-old Umiliana Lenzi to serve as its first abbess. As the convent chronicle noted, Umiliana 'had been employed for many years in the office of apothecary, where she demonstrated great charity and loving kindness to the sick'. Among those she chose to accompany her were two nuns who had long worked alongside her in the pharmacy because 'they were known to be extremely suitable' to help establish a new institution.[62]

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Shortly after ascending the ducal throne, Cosimo I enacted sweeping institutional reforms in the 1540s and 50s that brought poor relief, hospitals, convents, and many guild organizations under the purview of a centralizing state.[63] Within this emerging bureaucracy, two magistracies assumed responsibility for regulating convent pharmacies. The first was the Magistrato sopra i monasteri (est. 1545) charged with supervising practical aspects of convent life, from budgets to repair work. Building on republican foundations, the magistracy consisted of a capillary network of four lay supervisors (*operai)*

[60] ASF, CRSGF. 105. Vol. 67, fol. 19r; ASF, Auditore. Vol. 4892, fol. 144r–v.

[61] ASF, CRSGF. 100. Vol. 90, Bks. 12, 14, 15; Richa, *Notizie*, 7: 51; Viviani della Robbia, *Nei monasteri fiorentini*, 21.

[62] BNCF. II. II. 509, fols. 149v–150r, 151v.

[63] Nicholas Terpstra, 'Competing Visions of the State and Social Welfare: The Medici Dukes, the Bigallo Magistrates, and Local Hospitals in Sixteenth-Century Tuscany', *Renaissance Quarterly*, 54 (2001), 1319–55.

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assigned to every convent in the Medici dominion, who in turn reported to a central group of three deputies.[64] Both the Magistrato and the Florentine archbishop claimed the right to authorize visits to convent parlours and pharmacies via their own licensing mechanisms, setting up the possibility of serious jurisdictional conflicts. This scenario was largely avoided during Cosimo's reign owing to weak or absentee bishops. Cardinal Niccolò Ridolfi, who held the see *in absentia* from 1524 to 1532, resigned it in favour of Andrea Buondelmonti, only to later reclaim it when that much-despised cleric died in 1542. Following five more years of absentee governance by Ridolfi, the see passed to Antonio Altoviti in 1548. Political differences with the new archbishop led Cosimo to block Altoviti from taking control of the diocese until 1567, giving the state the upper hand over convents for a crucial quarter-century. Only with the election of Alessandro de' Medici in 1574 did Florence develop a strong church–state partnership; even then, the new Medici archbishop did not officially claim the diocese until 1583.[65]

The second regulatory body overseeing convent pharmacies was the Guild of Physicians and Apothecaries. New guild statutes passed between 1547 and 1559 reshaped the practice of medicine in the duchy: first by creating the prestigious College of Physicians and endowing it with supervisory powers; then by mandating triennial inspections of all apothecary shops to ensure that their pharmaceuticals were 'good, pure and not fraudulent in any way'.[66] Consequently, guild inspectors had to certify that nuns' medicinal wares met required standards. No other group of Tuscan healers, including monks and friars, were subject to this dual oversight; indeed, it was unusual for other Italian locales. Monastic pharmacies in sixteenth-century Rome, for instance, were exempt from annual inspection by the Protomedicato, despite prohibitions against the practice of pharmacy by non-guild members.[67]

Dual oversight of Florentine convent pharmacies also led to frictions between magistracies. Guild officials occasionally found themselves at odds with the Magistrato, creating a tug-of-war that both nuns and the duke exploited to their own advantage. Periodic calls by guildsmen to close convent pharmacies met resistance from convent magistrates eager to protect nuns' livelihood. Similarly, guild attempts to maintain high standards via routine inspection clashed with attempts by convent magistrates to maintain equally high standards of enclosure. Conflicts arose even within the guild itself, since convent physicians had vested financial interests in maintaining the vitality of nuns' pharmacies. Nuns themselves impacted specific outcomes by exploiting

[64] Lorenzo Cantini, *Legislazione Toscana* (Florence: Albizziniana, 1800), 1: 260–4.

[65] Gilberto Aranci, *Formazione religiosa e santità laicale a Firenze tra Cinque e Seicento* (Florence: Pagnini, 1997), 29–44.

[66] *Statuti dell'Arte dei Medici e Speziali,* ed. Raffaele Ciasca (Florence: Olschki, 1922), 547–611; ASF, OSMN. Vol. 192, printed 1547 decree interleaved between fols. 556 and 557. The hospital of S. Maria Nuova did not exercise any supervisory role over pharmacies.

[67] Colapinto, 'Arte speziali a Roma', 61.

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tensions between magistracies, by leveraging policies against each other, and by appealing to ducal patronage. The result was a complex, sometimes haphazard regulatory scene running counter to professionalizing aspirations. Cosimo's opportunistic decision-making only complicated matters further. Generally speaking, the duke was inclined to protect the important healthcare resources convent pharmacies represented. Yet he did so on his own terms, sometimes undercutting the authority of the very magistracies he had created. Cosimo repeatedly adjudicated conflicts between individuals or groups in ways that extended his personal influence over state functions and increased dependence on ducal favour. This competition certainly gave nuns some room to manoeuvre, but it also transformed convent pharmacies into another site of Medici state formation.

Several cases illustrate both the ad hoc nature of pharmacy regulation and the strategies used by various players. In October 1561, the S. Orsola nuns petitioned Cosimo to allow 'any person . . . to enter their convent without additional license from the [archbishop] in order to preserve their apothecary shop', which they maintained was 'their sole means of support'. In making this request, the nuns sought to advance their interests by explicitly recognizing the primacy of state authority over enclosure practices: although the requirement that each customer get a state license slowed business, they argued that requiring a second permit from the Church would be fatal. The nuns asserted that because they 'freely gave away the things they made in the pharmacy', both the infirm poor and cash-paying customers were forced to line up 'at every hour' to obtain the Magistrato's permission. The resulting 'inconvenience and bother' reportedly drove 'many persons' away, harming their business. As a favour to these Medici clients, Cosimo instructed the magistrates 'to see if this request might be accommodated in some way'. Upon investigation, they agreed that this policy harmed both the pharmacy and those seeking medical assistance there. The Magistrato proposed instead 'that all persons who either have a prescription from any Florentine physician or who get permission from the abbess or pharmacist of that convent can freely enter the premises without additional license.' While this far-reaching concession gave the S. Orsola nuns real latitude of judgment, Cosimo carefully noted that his approval neither set a precedent for other convents nor gave special support to any convent 'pharmacy business'.[68]

Having cleared this hurdle, S. Orsola still had to pass muster with the guild, which inspected various hospital and monastic pharmacies for the first time the following year (1562). Guild inspectors had nothing but praise for the 'most excellent' dispensary at the civic hospital of S. Maria Nuova, 'in which they found an abundance of drugs and compounds' maintained 'with a rare orderliness and ministration'. The same men lauded the pharmacies at S. Orsola and S. Caterina as being 'well-run and diligently managed'; they 'found

[68] ASF, Auditore. Vol. 4894, fol. 68r–v.

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nothing there to fault'. By contrast, the inspectors lambasted S. Marco's pharmacy, supervised by Fra Baccio, which reportedly 'displayed few medicines, the majority of which were badly made and managed'. Although guild officials proposed that the friar be barred from selling medicines in future, they lacked authority to execute this recommendation.[69]

Six months later, in December 1562, the nuns of S. Caterina petitioned the guild to amend its inspection procedures – a plea that was forwarded to the duke. Guild statutes stipulated that 'religious foundations that sell or dispense medicines outside' their premises should be inspected periodically by two physicians and four respected apothecaries. However, S. Caterina's top officers (including Sister Giovanna Ginori) argued that assembling such an esteemed group was hardly worthwhile in light of 'the little bit of pharmacy they practice, above all for their own poor community'. They proposed instead that their physician Francesco Gamberelli, a member of the prestigious Collegio, and the well-known pharmacist Stefano Rosselli, brother to three of the nuns, inspect 'the compositions produced in their pharmacy' not on a fixed schedule but 'as necessary'. Both men enjoyed solid reputations as well as a vested interest in the shop. Since recent guild inspection had shown that the nuns made 'good medicines, diligently kept', Cosimo granted the request, replacing corporate oversight with a small, self-interested group.[70]

Almost on cue, the Annalena nuns also requested alternative inspection procedures the following year (1563) but articulated a different rationale. Affirming the wisdom of guild inspection to ensure that 'medicines used for the benefit of the ill be made well, truly, and without fraud', the nuns reminded Cosimo that initial review had found their pharmacy to be 'furnished with good, well-compounded medicines'. The nuns expressed concern, however, that 'every time they wish to compound medicines they are obliged to call these deputized inspectors'. The petition did not state what kinds of compounds required supervision; Florentine guild statutes distinguished between medicines taken orally and those administered externally, with guild certification required for making the first. However, this distinction might be blurred in practice; for instance, one of the nuns' staples, aromatic rose water, might be ingested to clear phlegm from the chest or applied externally as an antiseptic to clean wounds.[71] Whatever the case, the Annalena nuns played on heightened expectations about female enclosure to strengthen their case, even though they still practiced open reclusion. 'Since the nuns have their pharmacy in the middle of the convent', read their petition, 'it displeases them greatly that these lay visitors have to pass through

[69] ASF, OSMN. Vol. 193, fol. 186r–v, dated 30 April 1562.

[70] ASF, OSMN. Vol. 193, fol. 229r–v, reply dated 30 Dec. 1562. Stefano di Romolo Rosselli came from a long line of painters and pharmacists who had been affiliated with S. Caterina since its foundation; Aurelio Gotti, *Ricordanze della nobile famiglia Rosselli Del-Turco tratte dai suoi archivi* (Florence: Calasanziana, 1890), 78–98.

[71] John Henderson, *The Renaissance Hospital: Healing the Body and Healing the Soul* (New Haven: Yale University Press, 2006), 311.

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almost the entire cloister' to do their job. Instead they requested that their own physician always function as the designated inspector. Once again the nuns successfully narrowed the regulatory circle through the duke's good graces.[72] A decade later (1572), however, guild officials won a small victory by mandating that the nuns of S. Caterina and the Annalena dispense medicines in the presence of their physician and his deputized pharmacist.[73]

These piecemeal measures continued to mark state regulation of convent pharmacies under Cosimo's successors. Despite different administrative styles, neither Francesco I (r. 1574–87) nor Ferdinand I (r. 1587–1609) developed a coherent regulatory policy but instead granted favours to one group or another opportunistically to advance ducal interests. In the 1580s, Francesco rebuffed guild proposals requiring that all pharmacists be licensed, while Ferdinand personally financed the repair of Le Murate's flood-ravaged pharmacy in 1589.[74] The guild took regulatory action as well. Responding to fluctuating prices caused by the heavy influx of medicinals from Rome, Venice, and Pisa, it standardized prices for simple and compound medicines as well as for common apothecary goods in 1593.[75]

Catholic reform initiatives complicated this regulatory picture, but they did not shutter convent pharmacies completely. New Tridentine enclosure provisions slowed business somewhat by the late 1580s and probably necessitated architectural modifications of dispensaries still to be explored. Yet contradictions within the Tridentine reform programme enabled convents to continue offering their products to a more limited public after Trent. Emphasizing monastic self-sufficiency as a corollary to *clausura*, reformers encouraged nuns to produce their own medicines in order to cut costs and reduce dependence on outsiders, especially their families. In 1577 Carlo Borromeo recommended that every convent maintain its own pharmacy, which allowed nuns to self-manage simple ailments. The Florentine archbishop Alessandro de' Medici (later Pope Leo XI) went still further in advocating pharmacy as a pathway to economic independence: in a 1601 treatise he advised nuns to boost revenues and develop greater financial autonomy by increasing production of textiles and herbal remedies.[76] With ecclesiastical backing, convent pharmacies flourished across Italy and Catholic Europe in the seventeenth century.[77]

Tensions persisted, however, over the moral status of marketing medicines for profit. Florentine nuns skirted ecclesiastical censure by requesting dona-

[72] ASF, OSMN. Vol. 193, fol. 242r–v, registered 6 April 1563.

[73] ASF, OSMN. Vol. 193, fols. 229v, 242v, dated July 1572.

[74] ASF, OSMN. Vol. 197, No. 169, dated 10 Nov. 1586; No. 173, dated 21 Jan. 1587; BNCF. II. II. 509, fols. 141v–142r.

[75] ASF, Libri di commercio e di famiglia. Vol. 164.

[76] Carlo Borromeo, *Instructiones fabricae et supellectilis ecclesiasticae*, 1577. Bk I, Ch. 33, trans. Evelyn Voelker <http://evelynvoelker.com/PDF/Book1-041709.pdf> (accessed October 2010); Silvia Evangelisti, 'To Find God in Work? Female Social Stratification in Early Modern Italian Convents', *European History Quarterly*, 38 (2008), 398–416, at 403.

[77] Sconci and Luzi, *Spezieria di San Benedetto*, 18.

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tions from pharmacy clients instead of selling items directly. In this way, the Annalena nuns, who made numerous medicines 'for their benefactors', sustained a robust shop accounting for seven per cent of all convent revenues in 1602–03. Between 1629 and 1632, a period encompassing a massive plague outbreak, the pharmacy garnered ten per cent of earned income, which kept the convent treasury afloat via a series of loans.[78] Still, marketing medicines, even under the guise of 'friendship and familiarity', rankled some church officials, who never spoke with a single voice. In 1637 the Congregation of Bishops and Regulars tried to prevent Roman religious pharmacies from selling remedies for profit, and their remit was understood as applying to all religious houses across Europe.[79] Florentine nuns largely eluded these bans by dispensing their wares *gratis* or by asking only a 'just price' in return. By skilfully adapting church regulations and embedding medicines in a gift economy, the pharmacy at S. Caterina continued to generate income as late as 1805.[80]

In sum, convent pharmacies significantly expanded the range of medical resources available to the Florentine populace, whether to manage health or treat specific illnesses. Essential to their financial success were female clients seeking new charitable avenues as well as reliable products. While Savonarolan motives loomed large in launching the first pharmacy at S. Caterina, the glaring need for poor relief in the 1530s and 40s led other nuns to follow suit. By commercializing their knowledge, Renaissance nuns not only generated crucial revenue for their communities, but also developed an important public presence as healthcare practitioners recognized by duke, guild, and customers alike. Patterning their training on traditional apprenticeships, religious women who engaged in commercial pharmacy kept their skills up-to-date via social networks, business partnerships and vernacular printed texts. The extent to which nun pharmacists enjoyed a sense of occupational identity and facilitated knowledge exchange between and among lay patrons remain intriguing questions for future research. Professionalizing trends made some headway in the sixteenth century, but the early Medici dukes protected and regulated convent pharmacies opportunistically. Marketing medicines remained a bone of contention between nuns and churchmen; yet Florentine nuns successfully adapted Tridentine reforms, whose complex aims both supported and slowed the growth of convent pharmacy. Consequently, religious women and their remedies remained an integral part of a pluralistic medical environment well into the seventeenth century.

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[78] ASF, CRSGF. 105. Vol. 35, fols. 196r–212v; Vol. 71.
[79] Colapinto, 'Arte speziali a Roma', 61.
[80] ASF, CRSGF. 106. Vol. 71, No. 23.

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